

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/598512

FILING DATE

30 APR 2008

APPLICANT(S)/

CLAIMS

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/		/		/	
2		/		/		/
3		0		2		/
4		0		2		/
5	/		/		/	
6		/		/		/
7		2		2		/
8		0		2		/
9		0		2		/
10		0		2		/
11		0		2		/
12		/		/		/
13		0		/		/
14		0		/		/
15		0		/		/
16		0		/		/
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18		0		/		/
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TOTAL IND.	2	↓	2	↓	2	↓
TOTAL DEP.	25	←	20	←	20	←
TOTAL CLAIMS	27		28		22	

	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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100						
TOTAL IND.		↓		↓		↓
TOTAL DEP.		←		←		←
TOTAL CLAIMS						